



## 2012 Excellence in Kentucky

### REGISTRATION FORM

### Conference and Awards Luncheon

MARRIOTT CONFERENCE CENTER, LEXINGTON, KY THURSDAY, MAY 31, 2012 8:30 AM – 4:30 PM  
1800 Newtown Pike, Lexington, KY

Prefix: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_ Fax: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

#### ATTENDEE CONFERENCE FEES

Conference (Includes Luncheon) \$ 149.00 (\$119 **before** May 1) \_\_\_\_\_ Number Attending: \_\_\_\_\_

Tables of 8 (Includes Luncheon) \$999.00 (\$799 **before** May 1) \_\_\_\_\_ Number Attending: \_\_\_\_\_

We will contact you for nametag information.

#### VENDOR DISPLAY TABLES

Vendor Display Tables \$300.00 \_\_\_\_\_ Number: \_\_\_\_\_

Vendor (KYCPE Members) \$200.00 \_\_\_\_\_ Number: \_\_\_\_\_

Conference Subtotal	Vendor Subtotal	TOTAL:
\$	\$	\$

#### PAYMENT OPTIONS

#### CREDIT CARD (receipt will be emailed to address specified below)

☐ Check # \_\_\_\_\_

☐ Credit Card

☐ Visa

☐ MasterCard

Card Number: \_\_\_\_\_

Expiration: \_\_\_\_\_

Name on Card: \_\_\_\_\_

Email: \_\_\_\_\_

Address for Card: \_\_\_\_\_

MAIL COMPLETED FORM WITH CHECK TO: KYCPE, ATTN: H. Standinger, 5004 Marchmont Way, Lexington, KY 40515

EMAIL COMPLETED REGISTRATION FORM WITH CREDIT CARD PAYMENT TO [hstandin@hotmail.com](mailto:hstandin@hotmail.com)

**FOR OVERNIGHT ACCOMMODATIONS MAY 30 AT THE Marriott GRIFFIN GATE Conference Center**

**PLEASE CALL 859-231-5100 Indicate KYCPE for Special Rate of \$130**